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<b>DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>		Attorney Docket Number	CRD5038
		First Named Inventor	Mark L. Pomeranz, et al.
		<b>COMPLETE IF KNOWN</b>	
		Application Number	Unknown
		Filing Date	October 29, 2003
		Group Art Unit	Unknown
		Examiner Name	Unknown

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**Expandable Stent Having Removable Slat Members**  
*(Title of the Invention)*

the specification of which

 is attached hereto

OR

 was filed on (MM/DD/YYYY)  as United States Application Number or PCT International Application Number   
 and was amended on (MM/DD/YYYY) 

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES      NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

### DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
		Pending

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AND

Practitioner(s) named below:  
Name    Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Henry W. Collins at telephone number (786) 313-2707.

Customer Number  
Direct all correspondence to:  or Bar Co de Label 000027777 OR  Correspondence address below

Name:

Address:

Address:

City:	State:	ZIP
Country	Telephone:	Fax:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Mark L.		Family Name or Surname Pomeranz	
Inventor's Signature		Date	
Residence: City Davie	State Florida	Country U.S.A.	Citizenship U.S.A.
Mailing Address 11980 Piccadilly Place			
City Davie	State Florida	ZIP 33325	Country U.S.A.
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SECOND INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Esteban		Family Name or Surname Pino	
Inventor's Signature		Date 10/24/03	
Residence: City Tampa	State Florida	Country U.S.A.	Citizenship U.S.A.
Mailing Address 5006 Royal Cypress Circle			
City Tampa	State Florida	ZIP 33647	Country U.S.A.
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF THIRD INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country

Please type a plus sign (+) inside this box

PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES      NO
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## **DECLARATION - Utility or Design Patent Application**

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Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
		Pending

I hereby appoint:

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AND

Practitioner(s) named below:

**Registration Number**

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Customer Number		
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<b>Name:</b>		
<b>Address:</b>		
<b>Address:</b>		
<b>City:</b>	<b>State:</b>	<b>ZIP</b>
<b>Country</b>	<b>Telephone:</b>	<b>Fax:</b>

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NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Mark L.		Family Name or Surname Pomeranz	
Inventor's Signature 		Date October 13, 2003	
Residence: City Davie	State Florida	Country U.S.A.	Citizenship U.S.A.
Mailing Address 11980 Piccadilly Place			
City Davie	State Florida	ZIP 33325	Country U.S.A.
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NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Esteban		Family Name or Surname Pino	
Inventor's Signature		Date	
Residence: City Tampa	State Florida	Country U.S.A.	Citizenship U.S.A.
Mailing Address 5006 Royal Cypress Circle			
City Tampa	State Florida	ZIP 33647	Country U.S.A.
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NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country